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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>		<b>Attorney Docket Number</b>	<b>TPP:656 US</b>
		<b>First Named Inventor</b>	<b>Thomas R. Stanley</b>
<b>COMPLETE IF KNOWN</b>			
<input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)		Application Number	
		Filing Date	
		Group Art Unit	
		Examiner Name	

Express Mail Mailing Label No. ET187784015US

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**APPARATUS FOR AUTOMATICALLY STUFFING FOOD CASING**

the specification of which:

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)  
International Application Numberas United States Application Number or PCT  
and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f) or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**DECLARATION – Utility or Design Patent Application**Direct all correspondence to: ☐ Customer Number  OR ☒ Correspondence address below  
or Bar Code Label**Name** Michael L. Dunn  
Dunn & Associates**Address** P.O. Box 10**City** Newfane**State** New York**ZIP** 14108**Country** U.S.A.**Telephone** 716-433-1661**Fax** 716-433-1665

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**☐ A petition has been filed for this unsigned inventor**Given Name**  
(first and middle [if any]) Thomas R.**Family Name**  
or Surname Stanley**Inventor's**  
**Signature****Date****Residence: City** Danville**State** Illinois**Country** USA**Citizenship** USA**Mailing Address** 336 Poland Road**City** Danville**State** Illinois**ZIP** 61834**Country** USA**NAME OF SECOND INVENTOR:**☐ A petition has been filed for this unsigned inventor**Given Name**  
(first and middle [if any]) Mark D.**Family Name**  
or Surname Kelley**Inventor's**  
**Signature****Date****Residence: City** Kansas City**State** Missouri**Country** USA**Citizenship** USA**Mailing Address** 8215 N. Virginia Avenue**City** Kansas City**State** Missouri**ZIP** 64118**Country** USA☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 3 of 4**

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Philip W.		Davis	
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
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City Pleasant Valley	State Missouri	ZIP 64068	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Thomas D.		Weston	
Inventor's Signature		Date	
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City Williamsport	State Indiana	ZIP 47993	Country USA

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## DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 4

☐ A petition has been filed for this unsigned inventor

Name of Additional Joint Inventor, if any:

Given Name (first and middle [if any])

Family Name or Surname

David L.

Wright

Inventor's  
Signature

Date

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Citizenship USA

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ZIP 61858

Country USA

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

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Signature

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Residence: City

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